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Bib Data Sheet

CONFIRMATION NO. 9164

SERIAL NUMBER 10/723,239	FILING OR 371(c) DATE 11/26/2003 RULE	CLASS 455	GROUP ART UNIT 2617	ATTORNEY DOCKET NO. 2003P12100 US
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APPLICANTS

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** CONTINUING DATA ***** *KF NONE*** FOREIGN APPLICATIONS ***** *KF NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/25/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 3	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>K. Keller</i> Examiner's Signature	<i>KF</i> Initials		

ADDRESS

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TITLE

Calls spanning sub-domains with independent call linkage

FILING FEE RECEIVED 1216	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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